



Application for Certification of Earthquake Sensitive Automatic Gas Shutoff Valve (ESV)

Certification form to be completed for each valve by the manufacturer of the automatic gas shutoff valve.
Submit completed form, with a \$500 certification fee for each valve (payable to Division of the State Architect) to:
Division of the State Architect, 1102 Q Street, Suite 5100, Sacramento, CA 95811-6550, ATTN: Raghbir P. Gupta.

1. Applicant Information

Manufacturer _____

Address _____ City _____ State _____ Zip _____

Telephone _____ FAX _____

Application is hereby made for certification of _____

Valve Model Number _____ Valve Size _____

| FOR DSA USE ONLY |
|-------------------------|
| Certification No. _____ |

2. Testing

Testing Laboratory _____

Address _____ City _____ State _____ Zip _____

Telephone _____ FAX _____

Verification Number (Qualified Testing Laboratory) _____

Test Report Number _____ Date Tested _____

Tested By (Qualified Testing Person) _____ Title _____

3. Production Inspection

Inspection Service Agency _____

Address _____ City _____ State _____ Zip _____

Telephone _____ FAX _____

Verification Number (Qualified Inspection Service Agency) _____

Inspection Schedule _____

4. Proposed Label

By _____

Title _____

Date _____